U.S. Department of Labor Office of Labor-Management ್ - Standards ್ ್ಟ್ರಿ Washington, DC 20210 erington gradiente, and the North of

## FORM LM-30 LABOR ORGANIZATION OFFICER AND Living Lington Lake of Commercial **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



## READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.



1. File Number 0 - 25/6/6		2. Fiscal Year Covered From:			
		1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.		Name, file number, and address of labor organization.			
Name	Randy	Name Machinists AFL-CIO, District Lodge 141			
		Labor Organization File Number 020-774			
P.O. Box, Bldg., Room No., if any		P.O. Box, Building and Room Number, if any P.O. Box 1149			
Street	1144 Makaiwa St.	Street 617 Veterans Blvd, Suite 201			
City	Honolulu	City Redwood City			
State	Hawaii ZIP Code + 4 96816	State California ZIP Code + 4 94064-1149			
5. Position in labor organization.  Assistant General Chairman					
A. Helo moneta	an interest in, engaged in transactions (including loans) with, or cary value from an employer whose employees your organization	on represents or is actively seeking to represent.			
A. Helo moneta	except as specified in the exclusion interest in, engaged in transactions (including loans) with or or	sions set forth in the instructions):			
A. Helo moneta	an interest in, engaged in transactions (including loans) with, or cary value from an employer whose employees your organization	sions set forth in the instructions):  derived income or other economic benefit of  on represents or is actively seeking to represent.			
A. Held moneta 6. Name Name	an interest in, engaged in transactions (including loans) with, or cary value from an employer whose employees your organization	sions set forth in the instructions):  derived income or other economic benefit of  on represents or is actively seeking to represent.			
A. Held moneta 6. Name Name Trade	an interest in, engaged in transactions (including loans) with, or cary value from an employer whose employees your organizations and address of Employer (including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.			
A. Held moneta 6. Name Name Trade	lan interest in, engaged in transactions (including loans) with, or cary value from an employer whose employees your organizations and address of Employer (including trade name, if any).	sions set forth in the instructions):  derived income or other economic benefit of  on represents or is actively seeking to represent.			
A. Helc moneta 6. Name Name Trade	lan interest in, engaged in transactions (including loans) with, or cary value from an employer whose employees your organizations and address of Employer (including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.			
A. Held moneta 6. Name Name Trade P.O. B	lan interest in, engaged in transactions (including loans) with, or carry value from an employer whose employees your organization and address of Employer (including trade name, if any).  Name, if any:  DX, Bldg., Room No., if any	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.			
A. Helcomoneta 6. Name Name Trade P.O. B Street City State	lan interest in, engaged in transactions (including loans) with, or carry value from an employer whose employees your organization and address of Employer (including trade name, if any).  Name, if any:  DX, Bldg., Room No., if any  ZIP Code + 4  Signa	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.			
A. Helcomoneta 6. Name Name Trade P.O. B Street City State	lan interest in, engaged in transactions (including loans) with, or carry value from an employer whose employees your organization and address of Employer (including trade name, if any).  Name, if any:  DX, Bldg., Room No., if any  ZIP Code + 4  Signa gnature and verification. The undersigned declares, under penalty of P	ture And A Mustine and the applicable peralties of the law, that all of the information and documents) has been examined by the signature and in to the heat of the			

Telephone Number

Name	of Person	Filing	Randy	Kauhane
5		_		**********

File Number U-

B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or directly to, or otherwise			
8. Name and address of Business (including trade name, if any).  Name Geffner & Bush, A Law Corporation  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 3500 West Olive Avenue, Suite 1100  City Burbank  State California ZIP Code + 4 91505-5513	9. Business deals with:   a. Labor Organization  b. Trust  c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	The Geffner & Bush legal firm is the primary legal council for the labor organization listed in item 4.			
Street	11.b. Approximate dollar value of such dealing. \$62,437			
City	12.a. Nature of interest held or income received.			
State ZIP Code + 4	Holiday gift: One spiral sliced turkey breast.			
	12.b. Amount. \$45			
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	14.a. Nature of payment.			
State ZIP Code + 4	14.b. Amount of payment.			